

UNITED STATES DISTRICT COURT  
for the

Northern District of Oklahoma

FILED

SEP 29 2021

Mark C. McCartt, Clerk  
U.S. DISTRICT COURT

21 CV - 422 GKF • SH

Case No.

(to be filled in by the Clerk's Office)

OHS MAYS

## Plaintiff(s)

(Write the full name of each plaintiff who is filing this complaint.  
 If the names of all the plaintiffs cannot fit in the space above,  
 please write "see attached" in the space and attach an additional  
 page with the full list of names.)

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OHS MAYS  
PLAINTIFF

V.

Grady County Law enforcement

SGT. NYC

SGT. Sheldon  
Officer Riley

Officer Wright

NURSE

Medical

John Doe #1

John Doe #2

LT TUCKER

LT LANCEY. O

~~State~~ unknown medical company.

I am summing all defendants in their  
individual and official capacity.

John Doe #3

John Doe #4

Jane Doe #1

Jane Doe #2

Jane Doe #3

Jane Doe #4

Jane Doe #5

LT Lenney

Dr. Maliki

CORPRN DNYA

CORPRN Maples

CORPRN Hanson

SGT. Tucker

CO Cudo

CO LENNY

CAPT Forsyth

CAPT Carpenter

Grady county

## Defendant No. 3

Name

RileyJob or Title (*if known*)CO OF CSA

Shield Number

UNKNOWN

Employer

Grady County Law Enforcement Center

Address

215. N. 3rd StreetCHICKASHAOK73108

City

State

Zip Code

 Individual capacity Official capacity

## Defendant No. 4

Name

CO FollowerJob or Title (*if known*)Correctional Officer (CO)

Shield Number

UNKNOWN

Employer

Grady County Law Enforcement Center

Address

215. N 3rd Street.CHICKASHAOK73108

City

State

Zip Code

 Individual capacity Official capacity

## II. Basis for Jurisdiction

Under 42 U.S.C. § 1983, you may sue state or local officials for the “deprivation of any rights, privileges, or immunities secured by the Constitution and [federal laws].” Under *Bivens v. Six Unknown Named Agents of Federal Bureau of Narcotics*, 403 U.S. 388 (1971), you may sue federal officials for the violation of certain constitutional rights.

A. Are you bringing suit against (*check all that apply*): Federal officials (a *Bivens* claim) State or local officials (a § 1983 claim)

## B. Section 1983 allows claims alleging the “deprivation of any rights, privileges, or immunities secured by the Constitution and [federal laws].” 42 U.S.C. § 1983. If you are suing under section 1983, what federal constitutional or statutory right(s) do you claim is/are being violated by state or local officials?

C. Plaintiffs suing under *Bivens* may only recover for the violation of certain constitutional rights. If you are suing under *Bivens*, what constitutional right(s) do you claim is/are being violated by federal officials?

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D. Section 1983 allows defendants to be found liable only when they have acted "under color of any statute, ordinance, regulation, custom, or usage, of any State or Territory or the District of Columbia." 42 U.S.C. § 1983. If you are suing under section 1983, explain how each defendant acted under color of state or local law. If you are suing under *Bivens*, explain how each defendant acted under color of federal law. Attach additional pages if needed.

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**III. Prisoner Status**

Indicate whether you are a prisoner or other confined person as follows (*check all that apply*):

Pretrial detainee  
 Civilly committed detainee  
 Immigration detainee  
 Convicted and sentenced state prisoner  
 Convicted and sentenced federal prisoner  
 Other (*explain*)

**IV. Statement of Claim**

*If I'm pretrial detainee or an convicted federal prisoner.*

State as briefly as possible the facts of your case. Describe how each defendant was personally involved in the alleged wrongful action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

A. If the events giving rise to your claim arose outside an institution, describe where and when they arose.

See attached

B. If the events giving rise to your claim arose in an institution, describe where and when they arose.

See attached

C. What date and approximate time did the events giving rise to your claim(s) occur?

See attachment

D. What are the facts underlying your claim(s)? (For example: *What happened to you? Who did what? Was anyone else involved? Who else saw what happened?*)

See attached

V. Injuries

If you sustained injuries related to the events alleged above, describe your injuries and state what medical treatment, if any, you required and did or did not receive.

See attached

VI. Relief

State briefly what you want the court to do for you. Make no legal arguments. Do not cite any cases or statutes. If requesting money damages, include the amounts of any actual damages and/or punitive damages claimed for the acts alleged. Explain the basis for these claims.

See attached

### Claim # 1

On 8- - 21 I arrived at the Grady County jail where an unknown medical department and staff such as Jane doe #1 and Jane doc #2 refused to give me my prescribed seizure medication. This went on for more then 3 days. On 8-18-21 I had a seizure.

### Claim #2

ON APPROXIMATELY 8-17/8-18-21 I WAS forced to sleep on a top bunk by jail staff after I repeatedly told them I could not do so due to my seizure. I told CO Relley, John doe #3, John doe #5, John doc #4 all that I had wrote medical multiple times and that medical also stated I was bottom bunk approved medically but the officer decline to move me to a bottom bunk. Then after I refused to continue to go up on the top bunk the officer forced me moved me to a 2 men cell and then forced me on another top bunk which I end up having

A seizure on 8-17 or 8-18 causms  
me to fall off the top bunk  
and Injurys my back, arm, eyes  
shoulder, hand, tooth, head and back  
Insides. Go pin you corporal and ~~book~~  
another corporal wheng the one that  
made me so into the 2 men cell.

ON 8-16-21 I told June doc # Claim #3  
dorms Evenms / night PH1 can that  
I had seizure but was not on a  
bottom bunk. She told the officer  
and he said he needs to find himself  
a bottom bunk then not my job.  
June doc said all I can do is  
ask them I can't make them  
give you a bottom bunk.

#### Claim #4

ON 8-12-17 I WAS IN MY UNIT WHEN  
I SEEN TWO INMATES WHO ALSO HAVE  
SEIZURE BUT WHERE PLACED ON TOP  
BUNKS INSTEAD OF BOTTOM BUNKS  
BE FORCED TO SIT IN LOCK DOWN  
FOR REFUSING TO CONTINUE TO GET ON  
A TOP BUNK.

The Grady County jail has an unwritten

Rule to Place Inmates that are listed as seizure to be place in danger by placing them on top bunks. I seen this happen to three different inmates.

### Claim #5

In August of 2021 I was seen by John Doe the jail medical provider regarding my injuries from my fall off top bunk. He stated that he would provide me with over Gel for my crack tooth for the pain issue and have me see a dentist and order me to have X-ray because he believe my shoulder could have been fractured or dislocated, prescribed me pain pills, I never had the X-ray he orders nor seen a dentist nor got the over Gel. I've had to deal with great pain every time I eat. My shoulder is visibly out of place, my tooth is visibly chipped and I still am having blood in my urine. I wrote multiple request to be seen but was never responde. There was a male CO and female nursing staff present also.

Claim #6

From AUS-13 - SEP 1ST I WROTE MULTIPLE REQUESTS, GRIEVANCES AS WELL AS VERBALLY TALKED TO MULTIPLE JAIL STAFF SUCH AS SGT. TUCKER, SGT. NYE, SGT. SHELDON, SGT LT. LANNY, LT. TUCKER, CAPT. CARPENTER, CAPT. FORSIGHT, CORP. MAPLES, CORP. HANESON, CORP K, CORP. PINYEAR, CO. LANCE, CO. RILEY, CO. HOLLOWAY, CO. WRIGHT, CO. TURNER, JANE DOC 1-10 AND JOHN DOC 1-10 ALL REGARDING MY APPEAL I HAD BEEN ORDER TO TYPE BY THE 8TH CIR COURT OF APPEALS. I SHOWED EACH OF THEM THE LETTER AND ORDER FROM THE COURT BUT EVERYONE ISN'T ME OR SAID THAT THERE WAS NOTHING THEY COULD DO TO HELP ME BECAUSE THEIR LT. Said I COULD NOT TYPE IT. EVEN THOUGH LT. LANNY SEEN THE ORDER HE STILL DENIED ME TO TYPE IT. I WAS UNABLE TO DO MY APPEAL.

Claim #7

From AUS-13 until Sep 1st I FILED MULTIPLE REQUESTS AND GRIEVANCES TO LT. LANNY AND CAPT. FORSIGHT ASKING TO BE ALLOWED TO MAKE A LEGAL CALL BUT WAS DENIED TO DO SO BECAUSE THE PHONES IN THE HARMS UNITS WOULD NOT WORK IF IT WAS A VOICE PROMPT. I WAS UNABLE TO COMMUNICATE WITH

MY COURT OF APPEALS OR THE DISTRICT COURT OR even  
The federal defenders office. All because they  
had voice prompts. The jail has other  
phones they allow legal calls from. Due to this  
I WAS UNABLE TO COMMUNICATE WITH MY COUNSEL  
AND COULD NOT FILE MY <sup>TYPED</sup> ~~CASE~~ IN TIME LIKE  
the court ordered.

### Claim # 8

The Grady COUNTY JAIL AND IT'S STAFF have  
an unwritten policy to not give an inmate a  
disciplinary hearing if they are given a  
disciplinary sanction. I along with several other  
inmates where given disciplinary charges but  
none where given disciplinary hearings.  
SST. WYIT told me they can do what ever  
they want that's just how Grady County does  
it.

I WAS GIVEN A DISCIPLINARY SANCTION FOR REFORMS  
REPEATEDLY ATTEMPTED TO PUT ME ON A TOP BUNK.  
I WAS THEN PLACED ON A LOCK DOWN UNIT AND  
TOLD I WOULD BE THERE UNTIL I LEFT THE

jail.

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## CLAIM #9

ON APPROXIMATELY AUG 20th. I ~~had~~ refused a cell assignment due to the fact that I was being forced to be on a top bunk. Which put my health in jeopardy. So several CO's, a fellow and some unknown jail staff. CO them I was not going into the cell because I had seizures and that I had already had one seizure and fell off a top bunk. CO fellow said he didn't care then him and other CO's forcibly grabbed me and forced me into the cell. While down so I was punched by a fellow multiple times.

CLAIMS 6 AND 7

I ASK THAT THE COURT ORDER THE JAIL AND ALL IT'S STAFF TO FOLLOW ALL FEDERAL ORDERS.

I ASK THAT THE JAIL PAY FOR THE ATTORNEY OF MY CHOICE OR SUPPLY ME WITH ONE TO HELP ME SET BACK INTO COURT SO I CAN ~~CONTINUE~~ CONTINUE MY APPEAL FIGHT.

I ASK THAT LT. O LANNY BE SUSPENDED FOR 2 MONTHS WITHOUT PAY. OR DEMOTED.  
I ALSO ASK THAT I BE PAID \$2,000.00  
FOR ALL THE LEGAL MATERIAL AND MONEY I WILL HAVE TO PAY TO DO LEGAL RESEARCH AND OTHER LEGAL EXPENSES.

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CLAIM # 9

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I WOULD LIKE \$500 AND FOR CO FOLLER TO BE FIRED. I WOULD ALSO LIKE FOR ALL THE OTHER OFFICERS INVOLVED TO HAVE TO DO SENSITIVITY TRAINING. I WOULD LIKE THE COURT TO ORDER CORPUS POLY A DEMOTED AND OR SUSPENDED WITHOUT PAY FOR 15 DAYS.

# Relief

CLAIMS # 1,2,3,4,

I AM REQUESTING TO BE PAID \$25,000.00  
IN PUNITIVE AND \$25,000.00 IN ACTUAL  
DAMAGES. DUE TO PAIN AND SUFFERS AND  
MEDICAL BILLS I WILL ENCL TO FIX MY  
MEDICAL ISSUES.

CLAIM 4.

I ASK THAT THE COURT ISSUE AN ORDER  
STOPPING THE典 FROM PUTTING INMATES  
ON TOP BUNKS WHO HAVE SEIZURES.

I ALSO ASK FOR EVERY OFFICER WHO WAS  
INVOLVED WITH PLACING ME OR OTHER INMATES  
ON TOP BUNKS TO BE SUSPENDED WITHOUT PAY FOR  
2 MONTHS AND HAVE TO WRITE ALL INMATES THEY  
PLACED AT RISK APPRAISE LETTER OR BE FIRED. I  
ALSO WOULD LIKE TO BE PAID \$15,000.00 FOR BEING  
PUT AT RISK REPEATEDLY.

CLAIM 5

I WOULD LIKE AN APPRAISE FROM THE MEDICAL PROVIDER  
AND FOR HIM TO BE SUSPENDED WITHOUT PAY FOR  
15 DAYS AND TO BE GIVEN A DENTAL SUPPORT AS  
WELL AS ONE FOR MY ARM, BACK AND BLOOD ISSUE.

## INJURIES

FOR CLAIMS #'S 1, 2, 3,

I SUFFERED A SEIZURE WHICH CAUSED ME TO FALL OFF A TOP BUNK. WHICH CAUSED ME TO INJURE MY MOUTH/TEETH, LIGHT SENSITIVITY, HEADACHES, MISFITS, RIGHT SHOULDER HAS LITTLE TO NO FEELING OR MOTION, LITTLE TO NO FEELING IN MY RIGHT ARM, MY FINGER HAS BONE ISSUES, I URNATE BLOOD, AND I HAVE THIS RUMS IN MY EARS. THE BACK PAIN I  
CLAIMS #9

I HAD MARKS ON MY FACE, CAUSE MORE SHOULDER PAIN, EMBARRASSMENT, EMOTIONAL PAIN

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CLAIMS #8, 6, 7

I WAS UNABLE TO TYPE MY APPEAL LIKE THE COURT OF APPEALS SWD SO I WAS UNABLE TO PUT IN MY PAST WHICH I'VE BEEN TOLD WILL BE CONSIDER AS ME WANTS MY ARGUMENT SO I'LL DOES.

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CLAIM #8

I WAS STUCK IN A DISCIPLINARY UNIT ONLY GIVEN 1 HOUR OUT A DAY OF MY CELL. STOPPING ME FROM BEING OUT ALL DAY OR HAVING A HEARING.

CLAIM #3

I have am still havins the range of motion issues, still havins sharp pains whenever I eat, drink or have an hit the back of my mouth, still havins migraines, still havins a light sensitivity issue. I am also still unable to have any feelings in my arm and still have the issue with one in my hand.

CLAIM #4

This put me as well as others at a repeated risk to involve ourselves and seems hurt really bad.

The only medical treatment I ~~was~~ was a prescription for nerve pain and I get my seizure meds. I never got the X-ray that the provider requested, the oral sed, to see a dentist, I still have not had my back or blood issue examined.

## VII. Exhaustion of Administrative Remedies Administrative Procedures

The Prison Litigation Reform Act (“PLRA”), 42 U.S.C. § 1997e(a), requires that “[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted.”

Administrative remedies are also known as grievance procedures. If the evidence shows that you did not fully comply with an available prison grievance process before filing this lawsuit, the Court may dismiss the unexhausted claim(s) or grant judgment against you.

## VIII. Previous Lawsuits

The “three strikes rule” bars a prisoner from bringing a civil action or an appeal in federal court without paying the filing fee if that prisoner has “on three or more prior occasions, while incarcerated or detained in any facility, brought an action or appeal in a court of the United States that was dismissed on the grounds that it is frivolous, malicious, or fails to state a claim upon which relief may be granted, unless the prisoner is under imminent danger of serious physical injury.” 28 U.S.C. § 1915(g).

To the best of your knowledge, have you had a case dismissed based on this “three strikes rule”?

Yes

No

If yes, state which court dismissed your case, when this occurred, and attach a copy of the order if possible.

A. Have you filed other lawsuits in state or federal court dealing with the same facts involved in this action?

Yes

No

B. If your answer to A is yes, describe each lawsuit by answering questions 1 through 7 below. (*If there is more than one lawsuit, describe the additional lawsuits on another page, using the same format.*)

1. Parties to the previous lawsuit

Plaintiff(s) \_\_\_\_\_

Defendant(s) \_\_\_\_\_

2. Court (*if federal court, name the district; if state court, name the county and State*)

3. Docket or index number \_\_\_\_\_

4. Name of Judge assigned to your case \_\_\_\_\_

5. Approximate date of filing lawsuit \_\_\_\_\_

6. Is the case still pending?

Yes

No

If no, give the approximate date of disposition. \_\_\_\_\_

7. What was the result of the case? (For example: Was the case dismissed? Was judgment entered in your favor? Was the case appealed?)  
\_\_\_\_\_  
\_\_\_\_\_

C. Have you filed other lawsuits in state or federal court otherwise relating to the conditions of your imprisonment?

Yes

No

D. If your answer to C is yes, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another page, using the same format.)

1. Parties to the previous lawsuit

Plaintiff(s)

Otis Mays

Defendant(s)

Sherburne County Jail

2. Court (if federal court, name the district; if state court, name the county and State)

United States District Court for Minnesota

3. Docket or index number

UNKNOWN

4. Name of Judge assigned to your case

UNKNOWN

5. Approximate date of filing lawsuit

UNKNOWN 2020 OR 2019

6. Is the case still pending?

Yes

No

If no, give the approximate date of disposition

7. What was the result of the case? (For example: Was the case dismissed? Was judgment entered in your favor? Was the case appealed?)

STILL UNKNOWN

## IX. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

### A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing:

9-2-21

Pro Se 14 (Rev. 12/16) Complaint for Violation of Civil Rights (Prisoner) (Mod 7/19)

**Signature of Plaintiff**

**Printed Name of Plaintiff**

Prison Identification #

**Prison Address**

## PERSONAL ADDRESS

**B. For Attorneys**

Date of signing:

**Signature of Attorney**

Printed Name of Attorney

**Bar Number**

Name of Law Firm

### Address

City

---

**State**

Zip Code

### Telephone Number

E-mail Address

**DECLARATION UNDER PENALTY OF PERJURY**

The undersigned declares (or certifies, verifies, or states) under penalty of perjury that he/she is the plaintiff in the above action, that he/she has read the above complaint and that the information contained therein is true and correct. 28 U.S.C. §1746. 18 U.S.C. §1621.

Executed at Sherburne County Jail on 9-8-21  
(Location) (Date)

John Mull  
Original Signature of Plaintiff

**Page Belcher  
Federal Building  
333 W. 4th Street,  
Room 411  
Tulsa, OK 74103**

Please use the following address to ensure mailings are delivered:

**United States Courthouse  
200 NW 4th St. STE 1210  
Oklahoma City, OK 73102**

**THE SUITE NUMBER MUST BE INCLUDED FOR DELIVERY**

**UNITED STATES DISTRICT COURT  
WESTERN DISTRICT OF OKLAHOMA**  
[www.okwd.uscourts.gov](http://www.okwd.uscourts.gov)

**CARMELITA REEDER SHINN**

CLERK OF COURT

**WILLIAM N. PIGOTT, JR.**

CHIEF DEPUTY CLERK

200 N.W. 4<sup>th</sup> Street, Room 1210

Oklahoma City, OK 73102

(405) 609-5000 Fax (405) 609-5099

Page Belcher Federal Building  
333 W. 4th Street,  
Room 411  
Tulsa, OK 74103  
Phone 918.699.4700  
RE:

To Whom It May Concern:

The enclosed misdirected document was received in our court on September 20, 2021.  
We are forwarding it to your court for filing.

Sincerely,

**CARMELITA REEDER SHINN, COURT CLERK**

by: s/ Damon Beasley  
Operations Supervisor

OFFICE OF THE CLERK  
WILLIAM J. HOLLOWAY, JR. UNITED STATES DISTRICT COURTHOUSE  
WESTERN DISTRICT OF OKLAHOMA  
200 N.W. 4TH STREET  
OKLAHOMA CITY, OKLAHOMA 73102-3092

OFFICIAL BUSINESS  
PENALTY FOR PRIVATE USE \$300

U.S. DISTRICT COURT  
MAIL CENTER  
May 23, 2021

RECEIVED

TO:



postmark  
label

OH 5 MAY  
Sherburne County Jail  
13880 Business Center Dr. Suite 200  
Elk River, MN, 55330  
*Boles*

Minneapolis, MN 554  
THU 16 SEP 2021 PM



Clerk of the court  
United States District Court  
200 NW 4th St  
Oklahoma City, OK, 73102

RECEIVED

SEP 20 2021

CARMELENE L. SPURR  
CLERK, U.S. DISTRICT COURT  
BY \_\_\_\_\_  
DEPUTY